## Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	0 <u>4-29-08</u>	Address:	elston rd
Case #:	<u>14-37834</u>		<u>cemetary</u>
County:	Tippecanoe		Lafayette
Type of Laboratory Seizure (check one) Seizure Location (check all that apply)			
Chem	itional Lab ical/Glassware/Equipment (only) isite (only)	Residence Outbuilding Vehicle	☐ Hotel/Motel ☑ Open – No Structure ☐ Other:
Items Found: Location (bedroom, kitchen, open air, etc) (check all that apply)  Lithium/Ammonia Reaction(s):			
Red Phosphorous/Iodine Reaction(s):			
Flammable Solvents:			
Water Reactive Metal (Lithium):			
Anhydrous Ammonia: open air			
☐ Hydrochloric Acid Gas Generator(s):			
Corrosive Acid:			
Corrosive Base:			
Other (item and location):			
Child under age 18 discovered (check one)  ☐ Yes (number present)  ☐ No  *If yes, fax report to Child Protective Services		Investigative Information  ☐ Ephedrine/Pseudoephedrine Tracking Log ☐ Retail/Merchant Tip ☐ Other:le	
This report is to be faxed to the following agencies that serve the location:			
Fire Department: <u>lafayette</u> Health Department: <u>Tippecanoe</u> Child Protection Service: <u>n/a</u>		Fax: <u>765-4</u> Fax: <u>765-4</u> Fax: <u>n/a</u>	
For further information regarding this methamphetamine laboratory, contact Investigating Officer: Holeman Phone 765-567-2125  ** This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department			
listed within 24 hours of scene processing.			

\*\*\* This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.